PTO/SB/17 (11-00)

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## **FEE TRANSMITTAL** for FY 2001

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**TOTAL AMOUNT OF PAYMENT** 

(\$) 390.00

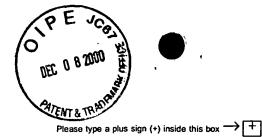
Complete if Known					
Application Number	08/974,179				
Filing Date	November 19, 1997				
First Named Inventor	Ming Li				
Examiner Name	C. Dexter				
Group Art Unit	3724				
Attorney Docket No.	129249-2				

The Commissioner is hereby authorized to charge independent claims peoposit Account Normber O2-2556  Deposit Account Normber Ceckert Seamans    Charge Any Additional Fee Required Independent Claims	METHOD OF PAYMENT	FEE CALCULATION (continued)					
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Complete (if applicable) SUBMITTED BY Registration No. Telephone Name (Print/Type) 32,949 412/566-6109 (Attorney/Agent) Signature Date 12/6/00

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**Application Number** 

	TRANSMITTAL		Filing Date	November 19, 1997						
	FORM			First Named Inventor	Ming Li					
:	(to be used for	all correspondence afte	er initial filing)	Group Art Unit	3724					
				Examiner Name	C. Dexter					
	Total Number	of Pages in This Subm	nission	Attorney Docket Numb	er 129249-2					
	ENCLOSURES (check all that apply)									
1/03/2001 N 1 FC:116	O0000002 022556 Extension of Time I 30.0two-month  Express Abandonr  Information Disclose Certified Copy of P Document(s) Response to Missii Incomplete Applica	eclaration(s) 08974179 Request 1) nent Request sure Statement riority	Drawing Licensin Petition Petition Provisio Change Address Termina Reques	ng-relatedPapers	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter X Other Enclosure(s) (please identify below): - copy of Fig. 1 with proposed change in red ink - copy of 5/21/99 Respors - return postcard	3 <b>e</b>				
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
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	Date	December 6,		. •						
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	I hereby certify that this cor mail in an envelope addres				vice with <u>sufficient postage as first</u> class date: 12/6/00					
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